

Registration Form for The Rice Women's Conference February 7-9, 2003

Name_____

Mailing Address_____

City, State, and Zip_____

Telephone_____

Email_____

Year of Graduation/Major_____

Residential College_____

I am (check all that apply)

Alumna/us

Faculty

Staff

Undergraduate student

Graduate student

Friend of Rice

Speaker

Please indicate your session preferences (non-binding)

Session One

Alexander Technique___

Hormones___

Passage: Transitions___

Changing the World___

Non-Traditional Roles___

Session Two

Self-Defense Panel___

Philanthropy___

Work and Families___

Women and Incarceration___

Global Economy___

Registration Form (cont.)

Session Three

Self-Esteem__

Reel Bodies__

Women in Sports __

Current Research__

Women and Health__

Meals

I request vegetarian meals_____

I will attend:

Friday night dinner_____

Saturday lunch_____

Saturday night dinner_____

Sunday brunch_____

Special Needs

Please indicate any special needs.

Return this form with payment to:

RICE WOMEN'S CONFERENCE

Rice University MS 30

P. O. Box 1892

Houston, TX 77251-1892

Amount enclosed:

\$100/Registration fee _____

\$20/Student registration fee _____

\$120/Registration and student subsidy _____

\$125/Late registration fee, after Jan. 24 _____

Please make checks payable to Rice University.